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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/070,867	03/12/2002	Maria Giuseppina Martini	IT 010006	2617
7590 12/17/2003			EXAMINER	
Philips Electronics North America Corporation			WAMSLEY, PATRICK G	
Corporate Patent Counsel 580 White Plains Road			ART UNIT	PAPER NUMBER
Tarrytown, NY 10591			2819	

DATE MAILED: 12/17/2003

Please find below and/or attached an Office communication concerning this application or proceeding.

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Application No. Applicant(s) 10/070,867 MARTINI ET AL. Interview Summary Examiner Art Unit 2819 Patrick G Wamsley All participants (applicant, applicant's representative, PTO personnel): (1) Primary Examiner: Patrick G Wamsley. (4)_____. (2) Applicant's Representative: Paul Lee. Date of Interview: 11 December 2003. Type: a) ☐ Telephonic b) ☐ Video Conference c) Personal [copy given to: 1) applicant 2) applicant's representative Exhibit shown or demonstration conducted: d) Yes e)⊠ No. If Yes, brief description: _____. Claim(s) discussed: Not applicable. Identification of prior art discussed: We discussed the Koenen reference... Agreement with respect to the claims f) was reached. g) was not reached. h) № N/A. Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant's representative requested a copy of the Koenen reference, listed as a "Y" document on the International Search Report. Primary Examiner Wamsley agreed to send one by facsimile to the listed number: (847) 905-7113. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unl ss it is an Attachment to a signed Office action.

Examiner's signature, if required